

<b>GENERAL SERVICES ADMINISTRATION</b> <b>NATIONAL ARCHIVES AND RECORDS SERVICE</b> <b>VITAL RECORDS PROTECTION STATUS REPORT</b> <b>(PART II - RIGHTS AND INTERESTS RECORDS)</b>		1. PROGRAM STATUS AS OF (Month, day, year)  <div style="text-align: center; font-size: 1.2em;">30 June 1965</div>												
<b>INSTRUCTIONS</b> Please submit this report in duplicate to the address shown below. This report is to be filled-out for the same organizational elements for which GSA Form 2034, dealing with emergency operating records, was completed.														
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="width: 150px;">TO:</div> <div>           General Services Administration            National Archives and Records Service            Office of Federal Records Centers            Washington, D.C. 20408         </div> </div>														
2. DEPARTMENT OR AGENCY  <div style="text-align: center; font-weight: bold;">Central Intelligence Agency</div>		3. BUREAU, SERVICE OR OFFICE												
4. REPORT COVERS <input checked="" type="checkbox"/> a. TOTAL ORGANIZATION <input type="checkbox"/> b. HEADQUARTERS ONLY <input type="checkbox"/> c. REGIONAL OR FIELD OFFICE														
5. ADDRESS OF REPORTING OFFICE (Number, street, city, State and code) <div style="text-align: center; font-weight: bold;">2430 E Street, NW., Washington, D. C. 20505</div>														
6. PROGRAM FOR SELECTING AND PROTECTING RIGHTS AND INTERESTS RECORDS HAS BEEN INITIATED <input checked="" type="checkbox"/> a. YES (See items 7 and 8) <input type="checkbox"/> b. NO (See item 9)														
7. PRESENT STATUS OF PROGRAM MEASURED IN TERMS OF OVERALL PROGRAM OBJECTIVES (Complete only if item 6 checked "Yes")  <div style="text-align: center; font-weight: bold; padding: 10px;">Program fully operative.</div>														
8. LOCATION(S) OF PROTECTED RECORDS (Complete only if item 6 checked "Yes") <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 40%;">a. CITY, STATE AND ZIP CODE</th> <th style="width: 40%;">b. STREET ADDRESS</th> <th style="width: 20%;">c. ROOM NO.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; vertical-align: middle; font-weight: bold;">Classified Information.</td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			a. CITY, STATE AND ZIP CODE	b. STREET ADDRESS	c. ROOM NO.	Classified Information.								
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9. REASON FOR LACK OF PROGRAM (Complete only if item 6 checked "No")  <div style="text-align: center; font-weight: bold; padding: 10px;">Not Applicable.</div>														
10. TARGET DATE FOR STARTING PROGRAM (If item 6 was checked "No" and target date not established, enter "None") <div style="text-align: center; font-weight: bold; padding: 5px;">Approved For Release 2005/11/21 : CIA-RDP70-00211R000500100027-5</div>														

11.

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FILE RECORD SERIES, DOCUMENT OR PUBLICATION TITLE (Example: Claim folders -  
property damage - settled cases; Research reports • desalinization - unpublished)

RECORDING MEDIUM (Paper,  
microfilm, punch-cards, etc.)  
b.

**CLASSIFIED INFORMATION**

Records deemed essential to protect the rights and  
interests of employees and those considered absolutely  
essential to reconstruction of the Agency in the event of an  
emergency.

Paper, Microfilm,  
Punch Cards, and  
Other means.

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REPORTED BY (Official immediately responsible for Vital Records Program)

NAME AND TITLE (Please print)

Chief, Records Administration Staff

TELEPHONE NO. (Or code) AND EXT.